

**510(k) Summary**  
**ArthroCare Corporation**  
**Parallax<sup>®</sup> Acrylic Resin Cartridge with TRACERS**

**General Information****Manufacturer:**

ArthroCare, Corporation  
680 Vaqueros Avenue  
Sunnyvale, CA 94085

**Establishment Registration Number:**

2951580

**Contact Person:**

Valerie Defiesta-Ng  
Director, Regulatory Affairs

**Date Prepared:**

November 11, 2005

**Device Description****Classification:**

PMMA Bone Cement: Class II per 21 CFR  
888.3027

**Trade Name:**

Parallax<sup>®</sup> Acrylic Resin Cartridge With TRACERS

**Device Code:**

NDN

**Generic/Common Name:**

Bone Cement

**Predicate Device**

Parallax<sup>®</sup> Acrylic Resin with TRACERS<sup>®</sup>

K042947

**Intended Use**

Parallax<sup>®</sup> Acrylic Resin Cartridge with TRACERS is intended for the fixation of pathological fractures of the vertebral body using vertebroplasty or kyphoplasty procedures. Painful vertebral compression fractures may result from osteoporosis, benign lesions (hemangioma), and malignant lesions (metastatic cancers, myeloma).

**Product Description**

Parallax<sup>®</sup> Acrylic Resin Cartridge with TRACERS is an opacified polymethylmethacrylate bone cement.

**Substantial Equivalence**

The subject device is substantially equivalent to the ArthroCare Parallax Acrylic Resin with TRACERS (K042947).



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

JAN 25 2006

Ms. Valerie Defiesta-Ng  
Director, Regulatory Affairs  
ArthroCare Corp.  
680 Vaqueros Ave.  
Sunnyvale, California 95408

Re: K053180

Trade/Device Name: Parallax Acrylic Resin Cartridge with Tracers  
Regulation Number: 21 CFR 888.3027  
Regulation Name: Polymethylmethacrylate (PMMA) bone cement  
Regulatory Class: Class II  
Product Code: NDN  
Dated: November 11, 2005  
Received: November 14, 2005

Dear Ms. Defiesta-Ng:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

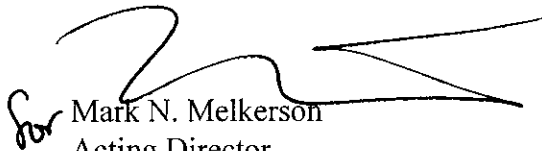
Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set

forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/industry/support/index.html>.

Sincerely yours,

for Mark N. Melkerson

Acting Director  
Division of General, Restorative,  
and Neurological Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

## Indications for Use Statement

510(k) Number (if known): K053180

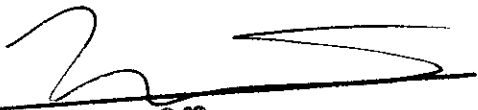
Device Name: Parallax<sup>®</sup> Acrylic Resin Cartridge with TRACERS

### Indications for Use:

Parallax<sup>®</sup> Acrylic Resin Cartridge with TRACERS is intended for the fixation of pathological fractures of the vertebral body using vertebroplasty or kyphoplasty procedures. Painful vertebral compression fractures may result from osteoporosis, benign lesions (hemangioma), and malignant lesions (metastatic cancers, myeloma).

Prescription Use   X   AND/OR Over-The-Counter Use       
(Part 21 CFR 801 Subpart D) (21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)  
Concurrence of CDRH, Office of Device Evaluation (ODE)

  
(Division Sign-Off)  
Division of General, Restorative,  
and Neurological Devices

510(k) Number K053180